

2017 Conference on the Young Years
March 9 11, 2017 • Tan Tar A • Osage Beach, Missouri

PRESENTATION PROPOSAL

Our goal is to provide participants with the opportunity to discuss appropriate practices, share ideas and receive developmental information in the area of Early Childhood. Presentations will be limited to two presenters. The proposal should be specific enough for reviewers to grasp the nature of the program, its scope and the planning done in preparation. We also ask that you write a brief description (two or three sentences) to assist in the writing of the conference brochure if the presentation is accepted. If you do not currently have a MOPDID number, contact OPEN at www.openinitiative.org or 1-877-782-0185. Complete this form and return via fax to 573-522-5085 or email to Angie.Koetting@dese.mo.gov. **Proposals must be received no later than July 1, 2016.**

Title of Presentation: _____

Have you presented this information before? ____ Yes ____ No

Presenter

(Contact Person – All correspondence for the conference will go to this person.)

Name: _____ MOPDID #: _____

Title: _____ Affiliation: _____

Home Telephone: _____ Work Telephone: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Co-presenter

Name: _____ MOPDID #: _____

Title: _____ Affiliation: _____

Home Telephone: _____ Work Telephone: _____

E-mail: _____

Audio/Visual: Please note that all meeting rooms will be set with one microphone, one podium and two 8-foot tables. A screen will also be provided upon request only. Presenters must provide all other audio/visual equipment needed for presentations including projectors and laptop computers.

Presenter will need a screen: ____ Yes ____ No

Presenter will use a PowerPoint that contains audio and/or video segments: ____ Yes ____ No

Length of Presentation: ____ 1 hour ____ 1 ½ hour

Would you be willing to do a repeat presentation? ____ Yes ____ No

Presentation Structure: ____ Lecture ____ Panel ____ Interactive ____ Make & Take

Special Requests: ____ A large room ____ Tables for participants ____ Need additional set-up time
____ Limited number of participants (maximum number of participants: _____)

Exhibit Information: Selling or promoting materials during this workshop is **strictly prohibited**. Presenter(s) may rent a booth space in the exhibit hall for this purpose. (Information will be available on the following website in the fall. <http://dese.mo.gov/quality-schools/early-learning/conference-young-years>)

Title of Presentation: _____

Interest Areas In order to best describe your presentation to the conference participants, please check **one** area of interest that applies.

- | | | |
|---|---|--|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Children with Disabilities | <input type="checkbox"/> Parents as Teachers |
| <input type="checkbox"/> Child Care | <input type="checkbox"/> Curriculum Related | <input type="checkbox"/> School Home Community Partnership |

Age Level Please check **all** areas that apply

- | | | |
|-----------------------------------|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Families | <input type="checkbox"/> Toddler | <input type="checkbox"/> Kindergarten |
| <input type="checkbox"/> Infant | <input type="checkbox"/> Preschool | <input type="checkbox"/> Primary |

Missouri Early Learning Goals Please check **all** areas that apply

- | | | |
|---|--|---|
| <input type="checkbox"/> Approaches to Learning | <input type="checkbox"/> Mathematics | <input type="checkbox"/> Social & Emotional Development |
| <input type="checkbox"/> Expressive Arts | <input type="checkbox"/> Physical Development, Health and Safety | <input type="checkbox"/> Understanding the World |
| <input type="checkbox"/> Language & Literacy | <input type="checkbox"/> Science | |

Core Competencies for Early Childhood and Youth Development Professionals - [Core Competencies Link](#)

Select the Content Area that best describes your presentation. For clarification please use the link provided.

- | | |
|---|--|
| <input type="checkbox"/> Child & Youth Growth and Development | <input type="checkbox"/> Learning Environment & Curriculum |
| <input type="checkbox"/> Observation & Assessment | <input type="checkbox"/> Families & Communities |
| <input type="checkbox"/> Health & Safety | <input type="checkbox"/> Interactions with Children and Youth |
| <input type="checkbox"/> Program Planning & Development | <input type="checkbox"/> Professional Development & Leadership |

Description of Presentation: Please provide a description of your proposed presentation, 50-100 words. Be specific as to how the presentation will be structured, and any materials to be used.

Suggested Description for Brochure: (two to three sentences that accurately describe your presentation to assist participants in making presentation selections)
